FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

		SECTION /	A - PROPERTY OW	NER INFORMA	TION	For Insurance Company Use:
BUILDING OWNER'S NA WARDLAW CONST	Policy Number					
BUILDING STREET ADD 107 GRAND VIEW DRIVI	Company NAIC Number					
CITY POOLER			ST/	TE	ZIP CC 31302	
PROPERTY DESCRIPTION	ON (Lot and Block	Numbers, Tax Parce	Number, Legal Desc	ription, etc.)		RCEL NUMBER 5-1014C-01-031
BUILDING USE (e.g., Res RESIDENTIAL	sidential, Non-residential	dential, Addition, Acce	ssory, etc. Use a Cor	nments area, if n	ecessary.)	KCEL NUMBER 5-1014C-01-031
	(ODTIONAL)	LIOPIT	ONTAL DATES			
LATITUDE/LONGITUDE (##°-##'-##.##" or ##			ONTAL DATUM: 27 NAD 1983	S	OURCE: GPS (Typ USGS Q	
	S	ECTION B - FLOOD	INSURANCE RATE	MAP (FIRM) IN	FORMATION	
B1. NFIP COMMUNITY NAME CITY OF POOLER 130261	& COMMUNITY NUM	BER	B2. COUNTY NAME CHATHAM			33. STATE GEORGIA
B4. MAP AND PANEL NUMBER 130030 0020	B5. SUFFIX C	B6. FIRM INDEX DATE 09/20/1995	B7. FIRM E EFFECTIVE/RE 05/19/	VISED DATE	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 18'
B10. Indicate the source of the						
	S FIRM	Community Det		Other (Describ		
B11. Indicate the elevation date B12. Is the building located in a				NAVD 1988	Other (Describe):	Designation Details
B12. Is the building located in a	SEC	TION C - BUILDING	FI FVATION INCOR	MATION (SUB)	/EV PEOUIDED)	Designation DateN/A
C1. Building elevations are bas						
*A new Elevation Certificat		-	☐ Building Under Cons	ruction" 🔼 i	Finished Construction	
guilding Diagram Number				his certificate is be	eing completed ass ===	age 6 and 7. If no diagram
accurately represents the l	<u>. (Coloot the building</u> building, provide a s	ketch or photograph)	o are building for writer	ina cerincate is de	any completed - see pag	ges o and /. If no diagram
C3. Elevations – Zones A1-A30			ከ BFE), AR, AR/A. AR/	.Ε. AR/A1-A30 ΔΙ	R/AH AR/AO	
Complete Items C3a-i be	low according to the	e building diagram speci	fied in Item C2. State the	datum used lifth.	e datum is different from	the datum used for the BFE in
Section B, convert the date	um to that used for t	he BFE. Show field mea	surements and datum	onversion calculat	ion Use the space prov	rided or the Comments area of
Section D or Section G, as	appropriate, to doc	ument the datum conve	rsion.		See the apace ploy	NACO OF SHO CONTINIONS AIRS OF
Datum NGVD 29 Conver	sion/Comments <u>N//</u>	<u>4</u>				
Elevation reference mark u	used <u>TBM</u> Does the	elevation reference ma	rk used appear on the F	RM? Yes D	⊠ No □	AND ADDRESS OF THE PARTY OF THE
o a) Top of bottom floor (in	ncluding basement		<u>20</u> . <u>2</u> ft.(m		Seal.	CORON
o b) Top of next higher flo			<u>*30</u> . <u>2</u> ft.(n		S S	100000000000000000000000000000000000000
o c) Bottom of lowest horiz		mber (V zones only)	<u>N/A</u> ft.	m)	mbossed nd Date	0000
o d) Attached garage (top		24 to 200 kB	18. 8 ft.(m)		odm:	A 110 2800
o e) Lowest elevation of m			7000		9. € 9. E	PROFESSIONAL
servicing the building		mments area)	<u>18</u> . <u>0</u> ft.(m		imbe aatur	5-05-95
o f) Lowest adjacent (finish			<u>17</u> . <u>9</u> ft.(m)		License Number, Signature,	
o g) Highest adjacent (finis		within 1 ft observe adi	18. 2 ft.(m		ğ Ö	A. HANG
o h) No. of permanent opeo i) Total area of all perma					.j	
5 1/ Total area of all perma		CTION D - SURVEYO		ARCHITECT CF	RTIFICATION	
This certification is to be sig	ned and sealed b	by a land surveyor, end	ineer, or architect au	horized by law to	certify elevation infor	mation
I certify that the information	ı in Sections A, B,	and C on this certifica	ite represents my bes	efforts to interpr	et the data available	muuvil,
I understand that any false	statement may be	punishable by fine or	imprisonment under	8 U.S. Code, Se	ection 1001.	
CERTIFIER'S NAME Joseph				L	ICENSE NUMBER GA I	RLS# 2886
TITLERegistered Land Surve	yor		COM	PANY NAME Kem	n-Coleman & Co. LLC.	
DDRESS			CITY		STATE	ZIP CODE
7 Mall Court	·		Savar	nah	GA	31406
SIGNATURE ,	1.	7	DATE 05/05/	05	TELEPHO (912)354-	
						E-

MPORTANT: In these spaces, copy the		Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, S 107 GRAND VIEW DRIVE	Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.	5		Policy Number
CITY	STATE GA		ZIP CODE 31302	Company NAIC Number
OOLER	D - SURVEYOR, ENGINEER, OR ARCHIT	ECT CERTIFICA	TION (CONTINUED)	
	(1) community official, (2) insurance agent/compar			
				COELOT 11 AT THE
RENCH MARK LISED FOR THIS SURVEY IS	SHOWN ON THE RECORDED SUBDIVISION F	MSI)	E HYDRANT IN FROM	TO LOT ITAT THE
	ND GRAND VIEW COURT (ELEVATION = 20.03	W.O.L.J.		
ELEVATION PROVIDED IN SECTION C3.b IS	THE ELEVATION OF THE BONUS ROOM.			
				Check here if attachments
SECTION E - BUILDING ELEY	VATION INFORMATION (SURVEY NOT RI	QUIRED) FOR 2	ONE AO AND ZON	E A (WITHOUT BFE)
r Zone AO and Zone A (without BFE), comple	te Items E1 through E4. If the Elevation Certificate	is intended for use	as supporting information	on for a LOMA or LOMR-F,
n o il	uilding diagram most similar to the building for whic			
م ماه آن حصر السائل السياد الس	elected or abotograph)			
accurately represents the building, provide a 2. The top of the bottom floor (including basem)	ent or enclosure) of the building isft.(m)in.	(cm) 🔲 above or	below (check one) t	he highest adjacent grade. (Use
	e page 7), the next higher floor or elevated floor (e			
grade. Complete items C3.h and C3.i on fro	ont of form. equipment servicing the building is ft.(m)in.	(cm) 🔲 above or	below (check one)	the highest adjacent grade. (Use
5. For Zone AO only: If no flood depth number	is available, is the top of the bottom floor elevated	in accordance with	the community s iloodp	iain management ordinance:
Yes No Unknown. The loca	al official must certify this information in Section G. N F - PROPERTY OWNER (OR OWNER'S	REPRESENTAT	IVE) CERTIFICATIO	N
The apportunity owner or owner's authorized ren	resentative who completes Sections A, B, C (Items	C3.h and C3.i only), and E for Zone A (wit	hout a FEMA-issued or community-
issued BFE) or Zone AO must sign here. The	statements in Sections A, B, C, and E are correct	to the best of my ki	nowledge.	
PROPERTY OWNER'S OR OWNER'S AUT	HORIZED REPRESENTATIVE'S NAME			
N/A ADDRESS	CI	TY	STAT	E ZIP CODE
ADDRESS		TE .	TELE	PHONE
SIGNATURE	D/	DATE		THORE
COMMENTS				
				<u> </u>
				Check here if attachments
	SECTION G - COMMUNITY INFOR	RMATION (OPTIC	ONAL)	
The local official who is authorized by law or or	dinance to administer the community's floodplain r	nanagement ordina	nce can complete Secti	ons A, B, C (or E), and G of this Elevat
	d sign bolour			
21 The information in Section C was take	n from other documentation that has been signed	and embossed by a	i licensed surveyor, eng ents area helow)	ineer, or architect who is additionated by
or local law to certify elevation informa	ation. (Indicate the source and date of the elevation E for a building located in Zone A (without a FEI)	/A-issued or comm	unity-issued BFE) or Zo	ne AO.
G2. [_] A community official completed Sections [] The following information (Items G4-G	9) is provided for community floodplain managem	ent purposes.	-, ,	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DAT	E CERTIFICATE OF COM	MPLIANCE/OCCUPANCY ISSUED
N/A		C90A 1913		
G7. This permit has been issued for: New	Construction Substantial Improvement		ft.(m)	Datum:
G8. Elevation of as-built lowest floor (including	basement) of the building is:		it.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding at t	ne building site is.	TITLE		
LOCAL OFFICIAL'S NAME				
COMMUNITY NAME		TELEPHON	L 	
SIGNATURE		DATE		15
COMMENTS				1937 8
				Check here if attachmer
				CHECK HOLE II affaciline